CAMPAIGN CONTRIBUTIONS AND EXPENSE	SREPORT	The.	ITER S	tate of Nevada	
IED FULLER	(if applicable)	1/20	5/6/2 n	strict (if applicable)	
Name (print) 9223 INSHIPS	(Tapplicable)	R NU	R9452	strict (ii applicable)	
Mailing Address (include city and zip code)	1001)	/	Telephone No.		
E-Mail Address	2				
Select Appropriate Box(es) CANDIDATE PAC	□POL PRTY □IN	DEXP NO	NPROFIT CORP		
☐ LEGAL DEFENSE FUND	MENDED		1	her	
Annual Filing - Due January 15, 2008			Lexi	0140	
Period: January 1, 2007 – December 31, 2007			gast gast	HED	
Report #1 — Due August 5, 2008*				at these server than	
Period: Jan. 1, 2008 — July 31, 2008			All	r _ 1 2000	
Report #2 Due — October 28, 2008*			AU	G - 4 2008	
Period: Aug. 1, 2008 — Oct. 23, 2008			OFCDE	TARY OF STA	
Report #3 Due — January 15, 2009*/**			FLEC	SECRETARY OF STA	
Period: Oct. 24, 2008 — Dec. 31, 2008					
Annual Filing – Due January 15, 2009			FOR OF	FICE USE ONLY	
Period: January 1, 2008 - December 31, 20	008				
* These Reports are filed by incumbents/cand	lidates running for	office in the	2008 election cy	cle	
** Third Report suffices for 2009 Annual Filing	if candidate also	filed Report N	los. 1 and 2	Cumulative	
CONTRIBUTIONS SUMMARY				From Beginning of Report Period #1	
			This Period	through End of This Reporting	
				Period	
1. Total Monetary Contributions Received in Excess of \$10	00		7	1	
(See page 1 of instruction sheet)			~ <u>_</u>		
Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)			0	1-0	
Total Monetary Contributions in the form of loans guar	ranteed by a third		A	2	
party. (See page 2 of instruction sheet)		Great Line	0	10	
 Total Monetary Contributions in the form of loans that v (See page 2 of instruction sheet) 	were forgiven		0	0	
(Ago bage a comment and a comment		umulative From			
	R	eport Period #1 hrough End of			
	T	nis Reporting eriod			
5. Total Amount of Monetary Contributions	SHORT COMMENTS OF STATE	enouspassassass	W	12	
Received (Add Lines 1 through 4) (See page 2 of instruction sheet)			~	10	
6. Total Amount of Written Commitments for					
Contributions (When commitment is funded, report as contribution (monetary or in kind))	15	2			
(See page 2 of instruction sheet)		V			
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)	10	0			
section of the sectio	CONTRACTOR AND	Competitive strates	TERROLEON SEMBRICA		
。 第一条第一条第一条第一条第一条第一条第一条第一条第一条第一条第一条第一条第一条第	XPENSES SUMMA	ARY			
8. Total Monetary Expenses Paid in Excess of \$100			2708	12200	
(See page 2 of instruction sheet)			700	2/08	
Total Monetary Expenses Paid of \$100 or Less (See page 2 of instruction sheet)			118	119	
10. Total Amount of All Monetary Expenses Paid			282/	28//	
(Add Lines 8 and 9) (See page 2 of instruction sh 11. Total Value of In Kind Expenses in Excess	neet)	-	20 26	10016	
of \$100 (See page 3 of instruction sheet)	0	0			
12. Disposition of Unspent Contributions					
(Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or					
incumbent does not run for reelection)					
(See page 3 of instruction sheet)					
I Declare Under Penalty of Perjury That the Fo	AFFIRMATION	nd Correct			
Declare Under Penalty of Perjury That the Fo	oregoing is True a	na correct.		10	
5/ Had la		8	1-3-0	8	
Signature			Date	ARE INCLUDED	

Revised: Dec-07

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The Fully

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	Amount of Each Contribution	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
	Z	*			
		0			
		M			

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TRO	FU	112/2
Name (print)		

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
VOTES UNLUM TRO	0	6-11-28	2708

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